

identify techniques for evaluating the results of country-specific cost-effectiveness ratios derived from such trials. Participants will learn when it is more appropriate to use country-specific ratios and when it is more appropriate to use the more precise pooled (average) ratio for the overall study to represent these countries' ratios.

**PARTICIPANTS WHO WOULD BENEFIT:** Designers, analysts, and managers of multinational trials as well as consumers of the results of such trials.

As economic studies are more frequently being performed in multinational trials, the question is raised whether the results of economic evaluations in these trials can inform decision-makers in the individual countries in which the trial was performed? We propose the use of re-sampling procedures to estimate point estimates and variances for the angles representing country-specific cost-effectiveness ratios. These point estimates and variances are then used to assess the homogeneity of the resulting ratios. These methods are illustrated using data from two multinational trials. In one, even though treatment patterns and outcomes differed among the countries, the treatment effect on costs, effects, and the cost-effectiveness ratio were homogeneous. In the second, we found evidence of heterogeneity in these effects. Data currently being collected in multinational trials can help us understand if the pooled ratio from the trial is representative of the ratios for the individual countries enrolled in the trial.

#### WMD3

### NEW METHODS OF DATA COLLECTION IN THE COMMUNITY-BASED PHYSICIAN SETTING: PROCESS AND TECHNOLOGY

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**WORKSHOP OBJECTIVE:** The purpose of this workshop will be to discuss and develop skills in formulating new methods for clinical data collection in the community-based physician setting.

**PARTICIPANTS WHO WOULD BENEFIT:** Researchers who are interested in moving beyond administrative data for longitudinal outcomes studies, but who are constrained by the complexity, time and effort of traditional clinical data collection methods would benefit from this workshop.

Data collection is a critical component of pharmacoeconomic and outcomes studies, and is often a key limiter of study design and scope. This workshop identifies several methods of clinical data collection in the community-based physician setting. This information has broad utility, including support of the conduct of pharmacoeconomics and outcomes research. Because dictation and transcription are the preferred means of documenting patient encounters, this workshop focuses on the role of

people, process and technology within that environment. Will physicians change their behavior to support collection of data elements needed to conduct studies? What types of technologies are needed to support discrete data element capture in a dictation/transcription environment? What is the evolving role the electronic medical record in data collection? How are electronic data stores utilized to cost-effectively validate source data? How can one overcome the challenges of codifying data elements that are collected in natural language? What is the role of manual processes in augmenting automated data collection? The workshop will present and explore practical strategies for collecting, managing and reporting clinical information in the community-based physician environment. Data collected through September 1998 on 5865 coronary artery disease patients will be presented to demonstrate results from the techniques presented.

#### WMD4

### COMBINING MARKET DATA AND STATED-PREFERENCE DATA TO ESTIMATE DEMAND FOR A NEW PHARMACEUTICAL

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**WORKSHOP OBJECTIVE:** The workshop participants will develop skills to identify limitations in market data, to design an SP survey that will remedy the limitations in market data, and to understand analytical methods that combine both existing market data and stated-preference survey data.

**PARTICIPANTS WHO WOULD BENEFIT:** New drug developers, pharmaceutical marketers, and others involved in the analysis of pharmaceutical market demand.

Market data for existing pharmaceuticals is useful in many situations. However, it has limitations. For example, market data contains only existing drugs' sales. Thus, it can not provide information on the demand for a new pharmaceutical in a therapeutic class. The usefulness of market data also may be limited by low variation in variables of interest or highly correlated product characteristics. In this workshop, the presenters will demonstrate methods for augmenting reality-based market data with data derived from an appropriately designed stated preference (SP) survey. SP surveys provide the opportunity to assess preferences for product attributes that do not currently exist in the market or for which market data is limited. Participants will learn how to apply SP methods by interactively developing a simple SP survey. The presenters will introduce the methods used in developing and administering an SP survey and will present methods of linking market and SP data that exploit the richness of both data sources. Finally, the presenters will demonstrate the power of linking market and SP data. The example estimates predicted sales of a novel drug that will be introduced in a mature market.